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QUERY CONTROL FORM		RTIS USE ONLY	
Application No. <u>09/650,182</u>	Prepared by <u>NDB</u>	Tracking Number <u>05892474</u>	
Examiner-GAU <u>SMITH - 2877</u>	Date <u>2/17/04</u>	Week Date <u>1/19/04</u>	
	No. of queries <u>1</u>	IPW	

JACKET			
a. Serial No.	f. Foreign Priority	k. Print Claim(s)	p. PTO-1449
b. Applicant(s)	g. Disclaimer	l. Print Fig.	q. PTOL-85b
c. Continuing Data	h. Microfiche Appendix	m. Searched Column	r. Abstract
d. PCT	i. Title	n. PTO-270/328	s. Sheets/Figs
e. Domestic Priority	j. Claims Allowed	o. PTO-892	t. Other

SPECIFICATION	MESSAGE
a. Page Missing	<p>Continuing data listed on palm/bib sheet don't match continuing data in the specification. (see attached):</p> <p>bib sheet = <u>09/360,651</u> 7/26/99 (CIP)</p> <p>CI-amdt. = <u>09/360,051</u> 7/23/99 (CIP) 6,163,377</p> <p>Please advise.</p> <p>frankyou</p>
b. Text Continuity	
c. Holes through Data	
d. Other Missing Text	
e. Illegible Text	
f. Duplicate Text	
g. Brief Description	
h. Sequence Listing	
i. Appendix	
j. Amendments	
k. Other	
<p>CLAIMS</p> <p>a. Claim(s) Missing</p> <p>b. Improper Dependency</p> <p>c. Duplicate Numbers</p> <p>d. Incorrect Numbering</p> <p>e. Index Disagrees</p> <p>f. Punctuation</p> <p>g. Amendments</p> <p>h. Bracketing</p> <p>i. Missing Text</p> <p>j. Duplicate Text</p> <p>k. Other</p>	
	<p>RESPONSE</p> <p>The C amendment is correct.</p> <p>Bib sheet corrected.</p>
	<p>initials <u>SMH</u></p> <p>initials <u>JBH</u></p>



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Bib Data Sheet

CONFIRMATION NO. 9219

SERIAL NUMBER 09/650,182	FILING OR 371(c) DATE 08/29/2000 RULE	CLASS 356	GROUP ART UNIT 2877	ATTORNEY DOCKET NO. 24837/04206
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**** CONTINUING DATA *******

This application is a CIP of 09/360,051 07/23/1999 PAT 6,163,377

**** FOREIGN APPLICATIONS *********IF REQUIRED, FOREIGN FILING LICENSE GRANTED**

** 10/10/2000

Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY PA	SHEETS DRAWING 18	TOTAL CLAIMS 14	INDEPENDENT CLAIMS 3
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature	Initials		

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TITLE

COLORIMETER HAVING FIELD PROGRAMMABLE GATE ARRAY

FILING FEE RECEIVED 904	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____
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